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GINA PIMENTEL RECORDER STATE OF INDIANA LAKE COUNTY RECORDED AS PRESENTED

2024-001290

2:41 PM 2024 Jan 17

State of Indiana County of Lake

POWER OF ATTORNEY

FOR

JEREMY A DUMAS

IMPORTANT INFORMATION

This power of attorney authorizes another person (your agent) to make decisions concerning your property for you (the principal). Your agent will be able to make decisions and act with respect to your property (including your money) whether or not you are able to act for yourself. The meaning of authority over subjects listed on this form is explained [state power of attorney act].

This power of attorney does not authorize the agent to make health care decisions for you. To authorize someone to make health care decisions for you, you will need to execute an Advanced Directive for Health Care.

You should select someone you trust to serve as your agent. Unless you specify otherwise in the Special Instructions, generally the agent's authority will continue until you die or revoke the power of attorney or the agent resigns or is unable to act for you. If you revoke the power of attorney, you should communicate your revocation by notice to the agent in writing by certified mail and you should consider filing such notice of revocation with the clerk of superior court in your county of domicile.

Your agent is not entitled to any compensation unless you state otherwise in the Special Instructions section. Your agent shall be entitled to reimbursement of reasonable expenses incurred in performing the acts required by you in your power of attorney.

This form provides for designation of one agent. If you wish to name more than one agent, you may name a successor agent or name a coagent in the Special Instructions. Coagents will not be required to act together unless you include that requirement in the Special Instructions.

If your agent is unable or unwilling to act for you, your power of attorney will end unless you have named a successor agent. You may also name a second successor agent.

The power of attorney shall be durable unless you state otherwise in the Special Instructions section. A durable power of attorney is not affected by your subsequent disability or incapacity.

This power of attorney becomes effective immediately unless you state otherwise in the Special Instructions section.

If you have questions about the power of attorney or the authority you are granting to your agent, you should seek legal advice before signing this form.

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DESIGNATION OF AGENT I, JEREMY A DUMAS, name the following person as my agent: Hyrum LaTurner 902 S. Main St Crown Point, IN 46307 GRANT OF GENERAL AUTHORITY I grant my agent and any successor agent general authority to act for me with respect to the following subject as defined in the state power of attorney statute: (Initial each subject you want to include in the agent's authority. If you wish to grant general authority over all of the subjects you may initial "all preceding subjects" instead of initialing each subject. You may, but need not, cross out each power withheld.)) Real property transactions (when properly recorded)) Tangible personal property () Stocks and bonds) Commodities and options) Banks and other financial institutions) Operation of entity or business () Insurance and annuities

(____) Claims and litigation

Personal and family maintenance

) Estates, trusts, and other beneficial interests

(____) Benefits from governmental programs or civil or military service

(____) Retirement plans, and/or

) Taxes

(II) All preceding subjects

LIMITATION ON AGENT'S AUTHORITY

An agent that is not my ancestor, spouse, or descendant SHALL NOT use my property to benefit the agent or a person to whom the agent owes an obligation of support unless I have included that authority in the Special Instructions.

SPECIAL INSTRUCTIONS

You may give special instructions on the following lines (you may add lines or place your special instructions in a separate document and attach it to the power of attorney):

Special Instructions: Hyrum LaTurner shall be compensated for the time he spends carrying out his duties as my attorney according to the terms set forth in our engagement agreement.

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EFFECTIVE DATE

This power of attorney is effective immediately unless I have stated otherwise in the Special Instructions section.

RELIANCE ON THIS POWER OF ATTORNEY

Any person, including my agent, may rely upon the validity of this power of attorney or a copy of it unless that person has actual knowledge it has terminated or is invalid.

SIGNATURE AND ACKNOWLEDGMENT

December 7, 2023

State of Indiana County of Lake

aling. Col This document was signed in my presence on Dec (month)

(day), 2023 by

Jeveny Dunas (principal).

My commission expires: \-\3-2029

PREPARED BY: HYRUM LATURNER ATTORNEY AT LAW

"I AFFIRM, UNDER THE PENALTIES FOR PERJURY THAT I HAVE TAKEN REASON-ABLE CARE TO REDACT EACH SOCIAL SECURITY NUMBER IN THIS DOCUMENT, UNLESS REQUIRED BY LAW." PREPARED BY:_